Department of Public Works



1054 Oregon St.
Direct (503) 397–5090
Fax (503) 397–7215
publicworks@columbiacountyor.gov

### **PUBLIC ROAD EVENT PERMIT APPLICATION CHECKLIST**

_	to the event. Applicant to sign at the lower right of the application.
	Include a Certificate of Liability Insurance (\$2,000,000 covering all claims per occurrence).
	Include Document of Additional Insured identifying Columbia County, Oregon. Further identify by including the following language: "Without prejudice to coverage otherwise existing herein, Columbia County and all other affected public agencies, the Board of County Commissioners and the board of other affected public agencies, their officers including the Columbia County Sheriff, agents and employees are included as additional insured under this policy as to any claims or claims for injury to person, including death, or damage to property, resulting from or growing out of the activities of the named insured, including all volunteers, under the permit issued by the county for <u>(name of event) – sponsored by: (name of organization)</u> ."
	Include Indemnity Agreement signed and dated by applicant in the lower left of the page.
	Include a map of the route and identify traffic control measures that will be used during the event.
	Include payment for the Permit (\$100 or \$300 depending on the number participating)
	If necessary, include payment for cost reimbursement – amount to be determined by County

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St. Helens, OR 97051

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### **PUBLIC ROAD EVENT PERMIT APPLICATION**

Name of Event:		Application Date:			
Sponsor:					
Type of Event:					
Purpose of Event:					
Date of Event:		Beginning Time:			
Expected Number of Participants: _		_ Ending Time:			
Location of Assembly Area(s):					
Assembly Beginning Time:					
Number of Volunteers: Number	per/Type of S	upport Vehicles:			
Name of Applicant:					
Address:					
Work Phone: Home	Phone:	E-mail:			
Contact i Ciscii (otilci tilali applic	uiit)				
Address:	,				
Work Phone: Hom	ie Phone:	Email:			
Chair/Race Director (for athletic e	vents):				
Address:	,				
Work Phone: Hon	ne Phone:	Email:			
Previous Experience:					
ending point. Also include plans for rest stops, first aid stations, support vehicles, etc.  Fee: Applicant must submit with completed application \$100 for small events (less than 300 participants) and \$300 for large events (300 or more participants).  By signing this application, sponsor agrees to all terms and conditions set forth in the Public Road Event Ordinance, and any special conditions listed in the Permit, if this application is accepted and a Permit is issued by the County.					
Name of Sponsor:		Signature of Authorized Agent			
FOR COUNTY USE ONLY:					
Application Received:		ce Certificate Received:			
Application Fee Paid:	Indemn	ity Agreement Signed:			
Permit Issued:	Deposit	Received:			
Public Works Director or Designee:		Date:			

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#### **INDEMNITY AGREEMENT**

•	to be held				
known as the					
Sponsor/applicant shall maintain commercial general liability and property damage insurance in an amount of not less than \$2 million per occurrence to protect indemnitees. Sponsor/applicant shall provide County a certificate or certificates of insurance in the amount described above, which names County, its officers, agents, and employees, and the affected public agencies, their officers, agents and employees as additional insureds. Such certificate or certificates shall be accompanied by an additional insured endorsement.					
	BOARD OF COUNTY COMMISSIONERS				
	FOR COLUMBIA COUTY				
Agency	-				
Signature of Authorized Agent	Chair				
Date Signed	Date Signed				

RETURN TO:

Columbia County Public Works 1054 Oregon Street St. Helens, Oregon 97051 Phone | 503.397.5090 Fax | 503.397.7215

Email | publicworks@columbiacountyor.gov

## Department of Public Works



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#### INSURANCE REQUIREMENTS

Before Columbia County can issue a permit for a public event, the sponsor must provide proof of public liability insurance, including property damage, covering all sponsor's activities, including volunteers, arising out of the event with a single limit policy of not less than \$2,000,000 covering all claims per occurrence.

The policy also shall bear the following endorsement:

"Without prejudice to coverage otherwise existing herein, Columbia County and all other affected public agencies, the Board of County Commissioners and the boards of other affected public agencies, their officers including the Columbia County Sheriff, agents and employees are included as additional insureds under this policy as to any claims or claims for injury to person, including death, or damage to property, resulting from or growing out of the activities of the named insured, including all volunteers, under the permit issued by the county for:

#### Name of Event

"It is understood and agreed that this policy shall not terminate or be canceled prior to the completion of the event without first giving 30 days written notice of intention to terminate or to cancel said policy to the county.

"Notwithstanding the naming of additional insureds, the said policy shall protect each insured in the same manner as though a separate policy had been issued to each; but nothing herein shall operate to increase the insurer's liability as set forth elsewhere in the policy beyond the amount or amounts for which the insurer would have been liable if only one person or interest had been named as insured."

A Certificate of evidence of such insurance, together with the above endorsement, shall be submitted to the County and shall be subject to the approval of the County Counsel on behalf of Columbia County as to the adequacy of protection.

SEND CERTIFICATE To:
Columbia County Public Works
1054 Oregon Street
St. Helens, Oregon 97051
Phone | 503.397.5090
Fax | 503.397.7215
Email | publicworks@columbiacountyor.gov

This page is to be made a part of insurance policy #

GIVE THIS SHEET TO YOUR INSURANCE CARRIER.